

ASMC USE ONLY
FEE:
BOND REQUIRED:
DATE APPROVED:

APPLICATION FOR PERMIT REVISION

NAME OF PER	MITTEE:
LICENSE NO.:	PERMIT NO.:
EXPIRATION I	DATE OF PERMIT
MINE NAME: _	
NATURE OF RI	EVISION:
	NY CONDITIONS PLACED ON THIS PERMIT WHICH WOULD RELATE TO SED REVISION BEING REQUESTED:
ATTACH A I RECLAMAT	DETAILED ESTIMATE OF EFFECT OF PROPOSED REVISION ON ION COSTS.
NOTE:	Upon review of this application, ASMC will notify the permittee of required information and of the necessity of public notice.

Company Name:	
Mine Name:	

PART VI - FINAL VERIFICATION OF PERMIT REVISION APPLICATION

License No				
Permittee				
BY:				
- C	• ,			
ing application, that the application, that he best of his informa	at he is the re the facts and r	esponsible offi natters contain	cial of the ned therein	
	e me, this		day	
	the undersigned who being duly ing application, that the application, that the best of his informaterein expressed.	the undersigned authority, who being duly sworn upon oa ing application, that he is the reche application, that the facts and release to f his information and belief, erein expressed. subscribed before me, this	Permittee (If Applicable BY:	